Shortages of Supplies for Health Services

March 2012

Ref: Drugs 2 (March 23, 2012)



occupied Palestinian territory

1. Shortages of Essential Drugs and Disposables, West Bank and Gaza

Serious shortages in supplies of Essential Drugs and Disposables are reported by the Ministry of Health (MoH) in both the West Bank and Gaza, mid-March 2012, with higher shortages in Gaza.

MoH Ramallah reported that 101 drugs (19% of 523 drugs on the essential drug list) and 61 medical disposables items (8% of 720 essential items) were exhausted. The zero stocks include basic items such as heparin, insulin, ephedrine, and x-ray film, hypodermic needles and gloves. The MoH issued an appeal to the international community March 15 calling for the immediate supply of a critical list of 31 "highly sensitive essential items" among those at zero stock. The MoH Ramallah last released inventory levels for the West Bank in October 2011 when 17% of essential drugs were at zero stock levels.

In Gaza, the MoH Central Drug Store, which depends heavily on outside donations to supplement supplies shipped by the MoH in Ramallah, reported in early March that 186 medicines were at zero stock (39%) in its stores; another 73 drugs were at low stock of less than 3 months. Drug shortages in Gaza averaged above 30% for most of 2011.

The financial crisis of the Palestinian Authority, as well as the political divisions between the West Bank and Gaza, has been the cause of the chronic shortages, which is being felt at hospital and primary health care level in curtailed services such as elective surgeries, and higher costs to patients. For elderly chronic patients, the monthly expense of purchasing drug prescriptions at full price can be prohibitive.

	Gaza Strip*	West Bank
Essential drugs	259	180
Zero Stock	186	**101
Low stock	73	79
Medical	260	74
disposables		
Zero stock	200	61
Low stock	60	13
Reagents	NA	48

Shortages of Drugs and Disposables, March 2012.

*On March 12, MoH Ramallah shipped 222 pallets of 73 drugs items and 118 medical disposable items to Gaza. Of these, 29 drugs items and 11 medical disposable items had been requested as needing replenishment by CDS in February 2012. The value of the shipment was estimated as NIS 2,984,778 for medicines and NIS 1,271,025 for disposables.

**31 were listed by the MoH Ramallah as "highly essential".

The MoH Ramallah reported that it spent about \$65 million to procure medicines, medical disposables and reagents in 2011. The Central Drug Store in Gaza mentioned that the five

shipments of drugs received in 2011 from Ramallah filled 41% of the items requested, and were valued at 20% of total value of items required. Meanwhile, pharmaceutical suppliers demonstrated in the West Bank this week, protesting that their lack of payment for previous drug shipments threatens their sustainability.

Zero stocks include common medications: anti infective drugs, chemotherapy drugs, kidney dialysis, ophthalmological preparations, psychotherapeutics, and cardiovascular medicines. Critical materials required for the function of hemodialysis machines are frequently at critical levels. In December, WHO, the ICRC and other international organizations intervened to solve an immediate shortage problem, and the MoH appealed again in February for dialyzers; however, only 25% of an emergency donation of the items were received so far, due to difficulties in import via the Jordan bridge.

2. Electricity and Fuel Shortages Affect Hospital Services

Israeli restrictions on imports have seriously affected power supplies and cause a chain reaction of problems for the population. Due to chronic inadequate capacity of main generators, electricity cuts in Gaza have increased from 6 hours daily to 16 hours daily in many areas, which in turn affects water supplies and critical services such as medical equipment in hospitals. Costly fuel is needed to operate backup generators in hospitals during power cuts, a total of 1000 liters per hour for the 12 hospitals in Gaza. Recent donations were made by the ICRC and local and international charities to keep hospitals viable. The main Shifa hospital reported receiving 300 requests to replace small generators in 2012, compared to 70 requests last year, due to overuse, and triple the usual number of medical equipment needing electrical repair, especially those with built-in battery systems. The recent cold wave increased demand for fuel, especially for vulnerable patients in neonatal and intensive care units.

Many elective surgeries have been postponed from 3 to 6 months, and referrals to non-MoH hospitals have increased due to the unreliable scheduling of surgical services, as well as insufficient drug supplies.

Current fuel supplies for hospitals are sufficient for only two weeks.